NOTIFICATION OF MULTICANDIDATE STATUS

PAGE 1 / 1

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee

Stand for America PAC (b) Number and Street Address 601 New Jersey Avenue NW Suite 620 (c) City, State and ZIP Code Washington DC 20001 I certify that one of the following situations is correct (complete line 4 or 5): 4. STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) on and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: FEC Identification Number: 5. STATUS BY QUALIFICATION: (a) Candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank.): Name	1. (a) N	AME OF C	COMMITTEE IN FULL			٦				
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Suite 620 (c) City, State and ZIP Code Washington DC 20001 STATE PARTY STATE PA	` '						FICATION	NILIMPED		
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Certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER Flectronically Filed DATE							II DATE			
TYPE OR PRINT NAME OF TREASURER Diehr, Sara, , , Diehr, Sara, , , Diehr, Sara, , Diehr, Sara, , ,			HAWL OF INEASURER		READORER [E	iectronically Filed				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437 ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			an of folio arrangous ar incomplete in					011000000		